



DEPARTMENT OF THE ARMY  
UNITED STATES ARMY CHEMICAL, BIOLOGICAL, RADIOLOGICAL  
AND NUCLEAR SCHOOL  
3<sup>RD</sup> CHEMICAL BRIGADE  
495 IOWA AVENUE  
FORT LEONARD WOOD, MISSOURI 65473

REPLY TO  
ATTENTION OF

ATSN-CBZ

SEP 10 2013

MEMORANDUM FOR Distribution

SUBJECT: Command Policy #16, Health Promotion, Risk Reduction and Suicide Prevention.

1. REFERENCES.

- a. AR 600-63 Army Health Promotion, 20 Sept 2009.
- b. DA PAM 600-24 Health Promotion, Risk Reduction and Suicide Prevention, September 2010
- c. HQDA EXORD 103-09 ISO Army Suicide Prevention, February 2009
- d. AR 350-1 Army Training and Leader Development, 2007.
- e. TRADOC 350-6 Enlisted Initial Entry Training Policies And Administration, January 2011.

2. APPLICABILITY. This policy applies to all 3<sup>rd</sup> Chemical Brigade units.

3. POLICY. Suicide is a potentially preventable tragedy that must be addressed. Engaged leadership in a unified effort of prevention can never bring back the Soldiers, Civilians and Family members lost to suicide – but it can combat further loss. This policy establishes visibility of suicidal behavior and recommendations for combating this issue. The guidelines set forth in this policy were developed to provide commanders, Soldiers, Civilians, and Family members a resource to prevent suicide.

a. Training Requirements: AR 350-1 requires annual suicide prevention and awareness training. 3<sup>rd</sup> Chemical Brigade units comply with the current requirements using a program designated or approved by HQDA i.e. ACE, Shoulder to Shoulder etc.

(1) Soldiers in training will be given suicide awareness training by the chaplain within 10 days of arriving in the training battalion.

(2) No less than 50% of drill sergeants or AIT platoon sergeants/squad leaders will be trained in Applied Suicide Intervention Skills Training (ASIST) T2T per platoon. Commanders and first sergeants are required to have the ASIST T2T training.

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b. Reporting: Information sharing is critical to identifying trends and risks. Identifying risks enables us to be proactive in reducing risk.

(1) All suicide ideations, attempts, or deaths of a Soldier will be reported IAW the 3<sup>rd</sup> Chemical Brigade Commander's Critical Information Requests (CCIR). Conversations do not preclude the written or electronic SIR requirement.

(2) Commanders will report any significant events to their battalion commander, battalion chaplain, brigade commander and brigade chaplain.

c. Definitions: As it relates to 3<sup>rd</sup> Chemical Brigade Soldiers, Civilians and family members; the following definitions will be used to report and discuss suicide.

(1) Suicide ideation – serious thoughts of harming one's self, including a plan of action.

(2) Suicide Gesture – an act intended to communicate intention of suicide but is unlikely to result in death (e.g. vitamin overdose, superficial lacerations, and reckless activity with verbal intent); generally motivated by a desire for assistance.

(3) Suicide attempt – an uncompleted act intended to result in death; involves a desire to die.

(4) Suicide – a purposeful act of self harm resulting in death.

d. Duties and Responsibilities: These duties and responsibilities are meant to provide assistance in order to combat suicide in 3<sup>rd</sup> Chemical Brigade Soldiers, Family members and Civilians.

(1) Battalion Commanders: Ensure SDO, CQ and staff personnel are familiar with the Commanders critical information request as well as the SIR SOP.

(2) Company Commanders: Ensure that annual suicide awareness training is conducted for permanent party. Ensure that suicide awareness training is conducted for Soldiers in training as they arrive for Basic Combat Training. Commanders will foster an atmosphere that will encourage those in need of help the opportunity to receive the help and counseling they need. All suspected suicidal Soldiers will be sent to behavioral health for assessment.

(3) Chaplains: Unit Chaplains will provide suicide awareness training to their units. Chaplains will be available to counsel Soldiers that identify themselves as being at risk or are perceived by others to be at risk for suicide. Within limits of the Chief of

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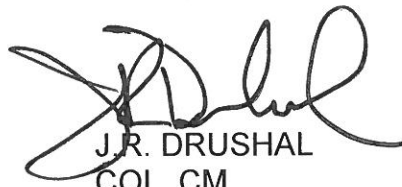
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Chaplains' policy, communicate serious incidents to the brigade commander, battalion commander, and brigade chaplain.

e. It is the responsibility of all Army leaders to ensure that all Soldiers, Civilians and Family members know the resources available to them to combat suicide personally in their homes and in their workplace. There are many resources available offering help; locally we have behavior health professionals, social work services, Military and Family Life Consultants, alcohol and substance abuse counselors, and chaplains. Military One Source, [www.militaryonesource.com](http://www.militaryonesource.com) provides details how to contact a local professional at no cost to talk with.

f. This policy memorandum will remain in effect until superseded or rescinded.

4. The proponent for this Policy is the 3<sup>rd</sup> CM Bde Chaplain at 6-4919.



J.R. DRUSHAL  
COL, CM  
Commanding